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SERIAL NUMBER 10/082,812	FILING OR 371(c) DATE 02/25/2002 RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 1540/144
APPLICANTS James W. Simpkins, Fort Worth, TX;				
** CONTINUING DATA ***** This application is a CON of 09/372,627 08/11/1999 PAT 6,350,739 which is a CIP of 09/179,640 10/27/1998 ABN which is a DIV of 08/749,703 11/15/1996 PAT 5,877,169 which is a CIP of 08/648,857 05/16/1996 PAT 5,843,934 which is a DIV of 08/318,042 10/04/1994 PAT 5,554,601 which is a CIP of 08/149,175 11/05/1993 ABN				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 03/21/2002				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials <i>TB</i>	STATE OR COUNTRY TX	SHEETS DRAWING 10	TOTAL CLAIMS 22 INDEPENDENT CLAIMS 9
ADDRESS 2101				
TITLE METHODS OF PREVENTION AND TREATMENT OF ISCHEMIC DAMAGE				
FILING FEE RECEIVED 705	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	